## MULTIPLE DEPENDENT CLAIM FEE CALCULA ON SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO.

1050597

APPLICANT(S)

FILING DATE

CLAIMS

|           | AS FILED   |  | AFTER 1"AMENDMENT |  | AFTER 2 damendment                               |               |
|-----------|--|--|-------------------|--|--|---------------|
|           | IND.   | DEP.   | IND.              | DEP.   | IND.   | DEP.          |
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| TOTAL INI | ).   | 1  | T                 | 1  |  | 1             |
| TOTAL DE  | <del>-</del>                                     | <b>~</b>   | 17                |  |  |               |
| TOTAL     |  | 31/35/31/3                                       | 1 0               | 1  |  |               |
| CLAIMS    | 1  |  |                   |  | 4  |               |

PTO - 1360 (REV. 11/04)

| ,               | AS FILED   |              | AFTER        |  | AFTER 2 MAMENDMENT |  |  |
|-----------------|--|--------------|--------------|--|--------------------|--|--|
|                 | IND.   | DEP.         | IND.         | DEP.   | IND.               | DEP.   |  |
| 51              |  |              |              |  |                    |  |  |
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| 55<br>56        |  |              |              | <del> </del>                                     |                    |  |  |
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| 73<br>74        |  |              |              |  |                    | <del> </del>                                     |  |
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| 80              |  | <b>]</b>     | <u> </u>     | <del>                                     </del> | <b>!</b>           | <del> </del>                                     |  |
| 81<br>82        |  |              |              | <del> </del>                                     | <del></del>        | <del>                                     </del> |  |
| 83              |  | 1            |              | 1.   | 1                  | <del>                                     </del> |  |
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| 92              |  |              | 1            | 1  |                    |  |  |
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| 96              | <del>  </del>                                    | <b> </b>     | <b>!</b>     |  | ļ                  |  |  |
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| 98<br>99        | 1  | <del> </del> | <del> </del> | <del> </del>                                     |                    | <del>                                     </del> |  |
| 100             | <del>                                     </del> | <del> </del> | 1            | 1  | 1                  |  |  |
| TOTAL IND       |  | 1            |              | 1  | ·                  | 1  |  |
| TOTAL DE        | ,  | 4            |              | 4  | <u> </u>           | Land Application                                 |  |
| TOTAL<br>CLAIMS |  |              |              |  |                    |  |  |
| CLAIMS          | U.S. DEPARTMENT of COMMERCE                      |              |              |  |                    |  |  |

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